

GENERAL ASSEMBLY COMMONWEALTH OF KENTUCKY

2010 REGULAR SESSION

HOUSE BILL NO. 444
THURSDAY, MARCH 11, 2010

The following bill was reported to the Senate from the House and ordered to be printed.

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TREY GRAYSON
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY

AN ACT relating to assisted-living communities.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

1		→ Section 1. KRS 194A.700 is amended to read as follows:
2	Asι	used in KRS 194A.700 to 194A.729:
3	(1)	"Activities of daily living" means normal daily activities, including bathing,
4		dressing, grooming, transferring, toileting, and eating;
5	(2)	"Assistance with activities of daily living and instrumental activities of daily
6		living" means any assistance provided by the assisted-living community staff with
7		the client having at least minimal ability to verbally direct or physically
8		participate in the activity with which assistance is being provided;
9	<u>(3)</u>	"Assistance with self-administration of medication," unless subject to more
10		restrictive provisions in an assisted-living community's policies that are
11		communicated in writing to clients and prospective clients, means:
12		(a) Assistance with medication that is prepared or directed by the client, the
13		client's designated representative, or a licensed health care professional
14		who is not the owner, manager, or employee of the assisted-living
15		community. The medication shall:
16		1. Except for ointments, be preset in a medication organizer or be in a
17		single dose unit;
18		2. Include the client's name on the medication organizer or container in
19		which the single dose unit is stored; and
20		3. Be stored in a manner requested in writing by the client or the client's
21		designated representative and permitted by the assisted-living
22		community's policies;
23		(b) Assistance by an assisted-living community staff person, which includes:
24		1. Reminding a client when to take medications and observing to ensure
25		that the client takes the medication as directed;

1	2. Handing the client's medication to the client, or if it is difficult for the
2	client or the client requests assistance, opening the unit dose or
3	medication organizer, removing the medication from a medication
4	organizer or unit dose container, closing the medication organizer for
5	the client, placing the dose in a container, and placing the medication
6	or the container in the clients hand;
7	3. Steadying or guiding a client's hand while the client is self-
8	administering medications; or
9	4. Applying over-the counter topical ointments and lotions;
10	(c) Making available the means of communication by telephone, facsimile, or
11	other electronic device with a licensed health care professional and
12	pharmacy regarding a prescription for medication;
13	(d) At the request of the client or the client's designated representative,
14	facilitating the filling of a preset medication container by a designated
15	representative or licensed health care professional who is not the owner,
16	manager, or employee of the assisted living community; and
17	(e) None of the following:
18	1. Instilling eye, ear, or nasal drops;
19	2. Mixing compounding, converting, or calculating medication doses;
20	3. Preparing syringes for injection or administering medications by any
21	injection method;
22	4. Administrating medications through intermittent positive pressure
23	breathing machines or a nebulizer;
24	5. Administrating medications by way of a tube inserted in a cavity of the
25	body;
26	6. Administrating parenteral preparations;
27	7. Administrating irrigations or debriding agents used in the treatment

1	of a skin condition; or
2	8. Administrating rectal, urethral, or vaginal preparations[Reminding
3	the client to take medications;
4	(b) Reading the medication's label;
5	(c) Confirming that medication is being taken by the client for whom it is
6	prescribed;
7	(d) Opening the dosage packaging or medication container;
8	(e) Storing the medication in a manner the client; and
9	(f) Making available the means of communicating with the client's physician and
10	pharmacy for prescriptions by telephone, facsimile, or other electronic
11	device] ;
12	(4)[(3)] "Assisted-living community" means a series of living units on the same site[
13	operated as one (1) business entity, and] certified under KRS 194A.707 to provide
14	services for five (5) or more adult persons not related within the third degree of
15	consanguinity to the owner or manager;
16	(5)[(4)] "Client," <u>"resident," or "tenant"</u> means an adult person who has entered into
17	a lease agreement with an assisted-living community;
18	(6)[(5)] "Danger" means physical harm or threat of physical harm to one's self or
19	others;
20	(7) "Department" means the Department for Aging and Independent Living;
21	(8)[(6)] "Health services" has the same meaning as in KRS 216B.015;
22	(9)[(7)] "Instrumental activities of daily living" means activities to support
23	independent living including but not limited to housekeeping, shopping, laundry,
24	chores, transportation, and clerical assistance;
25	(10)[(8)] "Living unit" means a portion of an assisted-living community occupied as the
26	living quarters of a client under a lease agreement;
27	(11)[(9)] "Mobile nonambulatory" means unable to walk without assistance, but able to

1		mov	e from place to place with the use of a device including but not limited to a
2		walk	ter, crutches, or wheelchair; and
3	<u>(12)</u>	"Pla	n of correction" means a written response from the assisted-living
4		<u>com</u>	munity addressing an instance cited in the statement of noncompliance;
5	<u>(13)</u>	"Sta	tement of danger" means a written statement issued by the department
6		detai	iling an instance where a client is a danger; and
7	<u>(14)</u>	"Sta	tement of noncompliance" means a written statement issued by the
8		<u>depa</u>	rtment detailing an instance when the department considers the assisted-
9		<u>livin</u>	g community to have been in violation of a statutory or regulatory
10	•	<u>requ</u>	irement[(10) "Department" means the Department for Aging and
11		Inde	pendent Living].
12		→ Se	ection 2. KRS 194A.703 is amended to read as follows:
13	(1)	Each	living unit in an assisted-living community shall:
14		(a)	Be at least two hundred (200) square feet for single occupancy, or for double
15			occupancy if the room is shared with a spouse or another individual by mutual
16			agreement;
17		(b)	Include at least one (1) unfurnished room with a lockable door, private
18			bathroom with a tub or shower, provisions for emergency response, window to
19			the outdoors, and a telephone jack;
20		(c)	Have an individual thermostat control if the assisted-living community has
21			more than twenty (20) units; and
22		(d)	Have temperatures that are not under a client's direct control at a minimum of
23			seventy-one (71) degrees Fahrenheit in winter conditions and a maximum of
24			eighty-one (81) degrees Fahrenheit in summer conditions if the assisted-living
25			community has twenty (20) or fewer units.
26	(2)	Each	client shall be provided access to central dining, a laundry facility, and a
27		centr	al living room.

1	(3)	Each assisted-living community shall comply with applicable building and life
2		safety codes as determined by the building code or life safety code enforcement
3		authority with jurisdiction.
4		→ Section 3. KRS 194A.705 is amended to read as follows:
5	(1)	The assisted-living community shall provide each client with access to the
6		following services according to the lease agreement:
7		(a) Assistance with activities of daily living and instrumental activities of daily
8		living;
9		(b) Three (3) meals and snacks made available each day;
10		(c) Scheduled daily social activities that address the general preferences of
11		clients; and
12		(d) Assistance with self-administration of medication.
13	(2)	Clients of an assisted-living community may arrange for additional services under
14		direct contract or arrangement with an outside agent, professional, provider, or other
15		individual designated by the client if permitted by the policies of the assisted-living
16		community.
17	(3)	Upon entering into a lease agreement, an assisted-living community shall inform the
18		client in writing about policies relating to the contracting or arranging for additional
19		services.
20	(4)	A client issued a move-out notice shall receive the notice in writing and the Each
21		assisted-living community shall assist each client upon a move-out notice to find
22		appropriate living arrangements. Each assisted-living community shall share
23		information provided from the department regarding options for alternative living
24		arrangements at the time a move-out notice is given to the client.
25	<u>(5)</u>	An assisted-living community shall complete and provide to the client:
26		(a) Upon move-in, a copy of a functional needs assessment pertaining to the

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client's ability to perform activities of daily living and instrumental activities

1		of daily living; and
2		(b) After move-in, a copy of an updated functional needs assessment pertaining
3		to the client's ability to perform activities of daily living and instrumenta
4		activities of daily living.
5		→ Section 4. KRS 194A.707 is amended to read as follows:
6	(1)	The Cabinet for Health and Family Services shall establish by the promulgation of
7		administrative regulation under KRS Chapter 13A, an initial and annual
8		certification review process for assisted-living communities[that shall include an
9		en-site visit]. This administrative regulation shall establish procedures related to
10		applying for, reviewing, and approving, denying, or revoking certification, as well
11		as the conduct of hearings upon appeals as governed by KRS Chapter 13B.
12	(2)	An on-site visit of an assisted-living community shall be conducted by the
13		<u>cabinet:</u>
14		(a) As part of the initial certification review process;
15		(b) On a biennial basis as part of the certification review process if during or
16		since the previous certification review an assisted-living community has not
17		received:
18		1. Any statement of danger, unless withdrawn by the cabinet; or
19		2. A finding substantiated by the cabinet that the assisted-living
20		community delivered a health service; and
21		(c) Within one (1) year of the date of the previous certification review if during
22		or since the last certification review an assisted-living community has
23		received:
24		1. Any statement of danger that was not withdrawn by the cabinet; or
25		2. A finding substantiated by the cabinet that the assisted-living
26		community delivered a health service.
27	(3)	No business[assisted-living community] shall market its service as an assisted-

1	<u>livir</u>	g community unless it operate unless its owner or manager has:
2	(a)	Filed a current application for the <u>business</u> [assisted-living community] to be
3		certified by the department as an assisted-living community; or
4	(b)	Received certification by the department as an[of the] assisted-living
5		community[from the department].
6	(4) No	business that has been denied or had its certification revoked shall operate or
7	mar	ket its service as an assisted-living community unless it has:
8	<u>(a)</u>	Filed a current application for the business to be certified by the department
9		as an assisted-living community; and
10	<u>(b)</u>	Received certification as an assisted-living community from the department.
11		Revocation of certification may be grounds for the department to not
12		reissue certification for one (1) year if ownership remains substantially the
13		same.
14	<u>(5)[(3)]</u>	No business shall operate[market its services] as an assisted-living
15	com	munity unless its owner or manager has:
16	(a)	Filed a current application for the <u>business</u> [assisted living community] to be
17		certified as an assisted-living community by the department; and or
18	(b)	Received certification <u>as an [of the]</u> assisted-living community from the
19		department.
20	<u>(6)[(4)]</u>	The department shall determine the feasibility of recognizing accreditation by
21	othe	r organizations in lieu of certification from the department.
22	<u>(7){(5)}</u>	Individuals designated by the department to conduct certification reviews shall
23	have	the skills, training, experience, and ongoing education to perform certification
24	revie	ews.
25	<u>(8)[(6)]</u>	Upon receipt of an application for certification [conducting a certification
26	revio	ew], the department shall assess an assisted-living community certification fee
27	in th	e amount of twenty dollars (\$20) per living unit that in the aggregate for each

1		assisted-living community is no less than three hundred dollars (\$300) and no more
2		than one thousand six hundred dollars (\$1,600). The department shall submit to the
3		Legislative Research Commission, by June 30 of each year, a breakdown of fees
4		assessed and costs incurred for conducting certification reviews.
5	<u>(9)</u>	The department shall submit to the Legislative Research Commission and make
6		available to any interested person at no charge, by June 30 of each year, in
7		summary format, all findings from certification reviews conducted during the
8		prior twelve (12) months.
9	<u>(10)</u>	[(7)] Notwithstanding any provision of law to the contrary, the department may
10		request any additional information from an assisted-living community or conduct
11		additional on-site visits to ensure compliance with the provisions of KRS 194A.700
12		to 194A.729.
13	<u>(11)</u>	Failure to follow an assisted-living community's policies, practices, and
14		procedures shall not result in a finding of noncompliance unless the assisted-
15		living community is out of compliance with a related requirement under KRS
16		194A.700 to 194A.729.
17		→ Section 5. KRS 194A.709 is amended to read as follows:
18	(1)	The department shall report to the Division of Health Care Facilities and Services
19		any alleged or actual cases of health services being delivered by the staff of an
20		assisted-living community.
21	(2)	An assisted-living community shall have written policies on reporting and
22		recordkeeping of alleged or actual cases of abuse, neglect, or exploitation of an
23		adult under KRS 209.030. The only requisite components of a recordkeeping
24		policy are the date and time of the report, the reporting method, and a brief
25		summary of the alleged incident.
26	(3)	Any assisted-living community staff member who has reasonable cause to suspect
27		that a client has suffered abuse, neglect, or exploitation shall report the abuse,

- neglect, or exploitation under KRS 209.030.
- 2 → Section 6. KRS 194A.711 is amended to read as follows:
- 3 A client shall meet the following criteria:
- 4 (1) Be ambulatory or mobile nonambulatory, unless due to a temporary health
- 5 condition for which health services are being provided in accordance with KRS
- 6 $\frac{194A.705(2) \text{ and } (3)}{1}$; and
- 7 (2) Not be a danger.
- Section 7. KRS 194A.713 is amended to read as follows:
- 9 A lease agreement, in no smaller type than twelve (12) point font, shall be executed by
- the client and the assisted-living community and shall include **but not be limited to**:
- 11 (1) Client data, for the purpose of providing service, to include:
- 12 (a)[A functional needs assessment pertaining to the client's ability to perform
- 13 activities of daily living and instrumental activities of daily living:
- 14 (b)] Emergency contact person's name;
- 15 <u>(b)</u> Name of responsible party or legal guardian, if applicable;
- 16 (c)[(d)] Attending physician's name;
- 17 (d) (e) Information regarding personal preferences and social factors; and
- 18 (e)[(f)] Advance directive under KRS 311.621 to 311.643, if desired by the
- 19 client ; and
- 20 (g) Optional information helpful to identify services that meet the client's needs].
- 21 (2) Assisted-living community's policy regarding termination of the lease agreement;
- 22 (3) Terms of occupancy;
- 23 (4) General services and fee structure;
- 24 (5) Information regarding specific services provided, description of the living unit, and
- 25 associated fees;
- 26 (6) Provisions for modifying client services and fees;
- 27 (7) Minimum thirty (30) day notice provision for a change in the community's fee

1		structure;
2	(8)	Minimum thirty (30) day move-out notice provision for client nonpayment, subject
3		to applicable landlord or tenant laws;
4	(9)	Provisions for assisting any client that has received a move-out notice to find
5		appropriate living arrangements prior to the actual move-out date;
6	(10)	Refund and cancellation policies;
7	(11)	Description of any special programming, staffing, or training if an assisted-living
8		community is marketed as providing special programming, staffing, or training on
9		behalf of clients with particular needs or conditions;
10	(12)	Other community rights, policies, practices, and procedures;
11	(13)	Other client rights and responsibilities, including compliance with KRS
12		194A.705(2) and (3); and
13	(14)	Grievance policies that minimally address issues related to confidentiality of
14		complaints and the process for resolving grievances between the client and the
15		assisted-living community.
16		→ Section 8. KRS 194A.715 is amended to read as follows:
17	(1)	An assisted-living community shall provide any interested person with a copy of
18		KRS 194A.700 to 194A.729 and relevant administrative regulations
19		(a) Consumer publication, as approved by the department, that contains a

- 19 (a) Consumer publication, as approved by the department, that contains a
 20 thorough description of Kentucky laws and regulations governing assisted
 21 living communities;
- 22 (b) Standard consumer checklist provided by the department; and
- 23 (c) Description of any special programming, staffing, or training if the assisted24 living community markets itself as providing special programming, staffing,
 25 or training on behalf of clients with particular needs or conditions.
- 26 (2) An assisted-living community may refer a request for information required in
 27 subsection (1)(a) of this section to the department].

1		Section 9. KRS 194A.717 is amended to read as follows:
2	(1)	Staffing in an assisted-living community shall be sufficient in number and
3		qualification to meet the twenty-four (24) hour scheduled[and unscheduled] needs
4		of each client pursuant to the lease agreement and functional need
5		assessment[its clients and the services provided].
6	(2)	One (1) awake staff member shall be on site at all times.
7	(3)	An assisted-living community shall have a designated manager who is at leas
8		twenty-one (21) years of age, has at least a high school diploma or a General
9		Educational Development diploma, and has demonstrated management or
10		administrative ability to maintain the daily operations.
11	(4)	No employee who has an active communicable disease reportable to the Department
12		for Public Health shall be permitted to work in an assisted-living community if the
13		employee is a danger to the clients or other employees.
14		→ Section 10. KRS 194A.719 is amended to read as follows:
15	<u>(1)</u>	Assisted-living community staff and management shall receive orientation and in-
16		service] education on the following topics as applicable to the employee's assigned
17		duties:
18		(a)[(1)] Client rights;
19		(b)[(2)] Community policies;
20		(c)[(3)] Adult first aid;
21		(d)[(4)] Cardiopulmonary resuscitation unless the policies of the assisted-living
22		community state that this procedure is not initiated by its staff, and that
23		clients and prospective clients are informed of the policies;
24		(e)[(5)] Adult abuse and neglect;
25		(D[(6)] Alzheimer's disease and other types of dementia;
26		(g)[(7)] Emergency procedures;
27		(h)[(8)] Aging process;

1	$\underline{(i)}[(9)]$ Assistance with activities of daily living and instrumental activities of
2	daily living;
3	(i)[(10)] Particular needs or conditions if the assisted-living community markets
4	itself as providing special programming, staffing, or training on behalf of
5	clients with particular needs or conditions; and
6	(k)[(11)] Assistance with self-administration of medication.
7	(2) Assisted-living community staff and management shall receive annual in-service
8	education applicable to their assigned duties that addresses no fewer than four
9	(4) of the topics listed in subsection (1) of this section.
10	→ Section 11. KRS 194A.723 is amended to read as follows:
11 ·	[(1) Any assisted living community that provides services without filing a current
12	application with the department or receiving certification by the department may be
13	fined up to five hundred dollars (\$500) per day.
14	(2)—]Any business that operates or markets its services as an assisted-living community
15	without filing a current application with the department or receiving certification by the
16	department may be fined up to five hundred dollars (\$500) per day.
17	→SECTION 12. A NEW SECTION OF KRS 194A.700 TO 194A.729 IS
18	CREATED TO READ AS FOLLOWS:
19	An assisted-living community that is issued more than two (2) statements of danger on
20	separate dates within a six (6) month period that are not withdrawn by the department
21	may be fined up to five hundred dollars (\$500).

Speaker-House of Representatives

Della Julian President of Senate

Attest:

Chief Clerk of House of Representatives

Approved

Date

e March 30, 2010